Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	NVN5329TLF	A. BUILDING _____ B. WING _____	01/27/2010

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
THE LAUNCHING PAD, INC - NELSON HOUSE	2300 NELSON WAY SPARKS, NV 89431

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
T 000	Initial Comments Surveyor: 28725 This findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws. This Statement of Deficiencies was generated as a result of the initial State Licensure survey conducted at your facility on 1/27/10. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility is licensed for five residential program beds for transitional living for released offenders. The census at the time of the survey was five. Five client files were reviewed. One discharged file was reviewed.	T 000		
T 135 SS=A	449.154969(1)(b) Preparations for disasters and other ermergen NAC 449.154969 Preparations for disasters and other emergencies. 1. An administrator shall develop a written plan for disasters that outlines procedures for members of the staff of the facility and residents of the facility to follow in case of a disaster or other emergency. The plan must include, without limitation, provisions outlining procedures to be followed with regard to: (b) Medical emergencies; This Regulation is not met as evidenced by: Surveyor: 28725	T 135		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE (X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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T 135	Continued From page 1 Based on record review on 1/27/10, the administrator failed to develop a written plan outlining the procedures for members of the facility and residents to follow for medical emergencies. This was a repeat deficiency from the 7/16/08 licensure survey. Severity: 1 Scope: 1	T 135		
T 160 SS=E	449.154969(4) Preparations for disasters/emergencies NAC 449.154969 Preparations for disasters and other emergencies. 4. Each facility shall conduct a drill for evacuation of the facility at least once each quarter and shall ensure that each shift of the staff of the facility participates in such a drill at least annually. This Regulation is not met as evidenced by: Surveyor: 28725 Based on record review and interview on 1/27/10, the facility failed to conduct a drill for evacuation for 1 of 4 quarters in 2009. Severity: 2 Scope: 2	T 160		
T 240 SS=D	449.154975(3)(d) Sanitation, safety and comfort NAC 449.154975 Sanitation, safety and comfort. 3. To the extent practicable, the premises of the facility must be kept free from: (d) Accumulations of dirt, garbage and other refuse.	T 240		

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T 240	Continued From page 2 This Regulation is not met as evidenced by: Surveyor: 28725 Based on observation the facility failed to keep the side yard free of a large amount of old discarded items (pallets, boards, boxes, mattresses, chair and refrigerator). Severity: 2 Scope: 1	T 240		
T 380 SS=D	449.154987(1)(f) First aid NAC 449.154987 First aid. 1. A first-aid kit must be available at the facility. The first-aid kit must include, without limitation: (f) A thermometer or other device that may be used to determine the bodily temperature of a person. This Regulation is not met as evidenced by: Surveyor: 28725 Based on observation on 1/27/10, the first-aid kit did not contain a thermometer or other device to be used to determine a person's body temperature. This was a repeat deficiency from the 7/16/08 licensure survey. Severity: 2 Scope:1	T 380		
T 500 SS=F	449.154997(1)(c) Files for residents NAC 449.154997 Files for residents. 1. An administrator shall ensure that the	T 500		

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T 500	Continued From page 3 facility maintains a separate file for each resident of the facility and retains the file for at least 5 years after the resident permanently leaves the facility. The file must be kept locked in a location that is protected against unauthorized use. Each file must contain the information obtained by the facility that is related to the resident, including, without limitation: (c) Evidence of compliance with the provisions of NAC 441A.380 This Regulation is not met as evidenced by: Surveyor: 28725 NAC 441A.380 Admission of persons to certain medical facilities, facilities for the dependent or homes for individual residential care: Testing; respiratory isolation; medical treatment; counseling and preventive treatment; documentation. (NRS 441A.120). 1. Except as otherwise provided in this section, before admitting a person to a medical facility for extended care, skilled nursing or intermediate care, the staff of the facility shall ensure that a chest radiograph of the person has been taken within 30 days preceding admission to the facility. 2. Except as otherwise provided in this section, the staff of a facility for the dependent, a home for individual residential care or a medical facility for extended care, skilled nursing or intermediate care shall: (a) Before admitting a person to the facility or home, determine if the person: (1) Has had a cough for more than 3 weeks; (2) Has a cough which is productive; (3) Has blood in his sputum; (4) Has a fever which is not associated with a cold, flu or other apparent illness; (5) Is experiencing night sweats; (6) Is experiencing unexplained weight loss; or	T 500		

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T 500	Continued From page 4 (7) Has been in close contact with a person who has active tuberculosis. (b) Within 24 hours after a person, including a person with a history of bacillus Calmette-Guerin (BCG) vaccination, is admitted to the facility or home, ensure that the person has a tuberculosis screening test, unless there is not a person qualified to administer the test in the facility or home when the patient is admitted. If there is not a person qualified to administer the test in the facility or home when the person is admitted, the staff of the facility or home shall ensure that the test is performed within 24 hours after a qualified person arrives at the facility or home or within 5 days after the patient is admitted, whichever is sooner. (c) If the person has only completed the first step of a two-step Mantoux tuberculin skin test within the 12 months preceding admission, ensure that the person has a second two-step Mantoux tuberculin skin test or other single-step tuberculosis screening test. After a person has had an initial tuberculosis screening test, the facility or home shall ensure that the person has a single tuberculosis screening test annually thereafter, unless the medical director or his designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200. 3. A person with a documented history of a positive tuberculosis screening test is exempt from skin testing and routine annual chest radiographs, but the staff of the facility or home shall ensure that the person is evaluated at least annually for the presence or absence of	T 500		

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T 500	Continued From page 5 symptoms of tuberculosis. 4. If the staff of the facility or home determines that a person has had a cough for more than 3 weeks and that he has one or more of the other symptoms described in paragraph (a) of subsection 2, the person may be admitted to the facility or home if the staff keeps the person in respiratory isolation in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200 until a health care provider determines whether the person has active tuberculosis. If the staff is not able to keep the person in respiratory isolation, the staff shall not admit the person until a health care provider determines that the person does not have active tuberculosis. 5. If a test or evaluation indicates that a person has suspected or active tuberculosis, the staff of the facility or home shall not admit the person to the facility or home or, if he has already been admitted, shall not allow the person to remain in the facility or home, unless the facility or home keeps the person in respiratory isolation. The person must be kept in respiratory isolation until a health care provider determines that the person does not have active tuberculosis or certifies that, although the person has active tuberculosis, he is no longer infectious. A health care provider shall not certify that a person with active tuberculosis is not infectious unless the health care provider has obtained not less than three consecutive negative sputum AFB smears which were collected on separate days. 6. If a test indicates that a person who has been or will be admitted to a facility or home has active tuberculosis, the staff of the facility or home shall ensure that the person is treated for the disease in accordance with the recommendations of the Centers for Disease Control and Prevention for	T 500		

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T 500	Continued From page 6 the counseling of, and effective treatment for, a person having active tuberculosis. The recommendations are set forth in the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200. The staff of the facility or home shall ensure that counseling and preventive treatment are offered to each person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200. 8. The staff of the facility or home shall ensure that any action carried out pursuant to this section and the results thereof are documented in the person ' s medical record. (Added to NAC by Bd. of Health, eff. 1-24-92; A 3-28-96; R084-06, 7-14-2006) Based on record review on 1/27/10, the facility did not ensure that 2 of 5 residents (Resident #4 and #5) met the requirements of NAC 441A.380 concerning tuberculosis (TB). This is a repeat deficiency from the 7/16/08 licensure survey. Severity: 2 Scope: 3	T 500		
T 545 SS=F	449.154999(4) Safety from fire NAC 449.154999 Safety from fire. 4. At least one portable fire extinguisher must be available at the facility. Any portable fire extinguishers available at the facility must be inspected, recharged and tagged at least once each year by a person certified by the State Fire Marshal to conduct such inspections.	T 545		

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T 545	Continued From page 7 This Regulation is not met as evidenced by: Surveyor: 28725 Based on observation and interview on 1/27/10, the facility failed to have 2 of 2 fire extinguishers inspected and recharged since 5/9/08. Severity: 2 Scope: 3	T 545		
T 560 SS=E	449.154999(6) Safety from fire NAC 449.154999 Safety from fire. 6. Smoke detectors installed in a facility must be maintained in proper operating condition at all times and must be tested monthly. The results of the tests conducted pursuant to this subsection must be recorded and maintained at the facility. This Regulation is not met as evidenced by: Surveyor: 28725 Based on record review and interview on 1/27/10, the facility failed to perform smoke detector checks for 4 of 18 months (September, October, November and December 2009). Severity: 2 Scope: 2	T 560		
T 575 SS=F	NAC 441A.375 Employee Tuberculosis NAC 441A.375 Medical facilities, facilities for the dependent and homes for individual residential care: Management of cases and suspected cases; surveillance and testing of employees; counseling and preventive treatment. 1. A case having tuberculosis or suspected case considered to have tuberculosis in a medical facility or a facility for the dependent must be managed in accordance with the guidelines of the	T 575		

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T 575	Continued From page 8 Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200. 2. A medical facility, a facility for the dependent or a home for individual residential care shall maintain surveillance of employees of the facility or home for tuberculosis and tuberculosis infection. The surveillance of employees must be conducted in accordance with the recommendations of the Centers for Disease Control and Prevention for preventing the transmission of tuberculosis in facilities providing health care set forth in the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200. 3. Before initial employment, a person employed in a medical facility, a facility for the dependent or a home for individual residential care shall have a: (a) Physical examination or certification from a licensed physician that the person is in a state of good health, is free from active tuberculosis and any other communicable disease in a contagious stage; and (b) Tuberculosis screening test within the preceding 12 months, including persons with a history of bacillus Calmette-Guerin (BCG) vaccination. If the employee has only completed the first step of a 2-step Mantoux tuberculin skin test within the preceding 12 months, then the second step of the 2-step Mantoux tuberculin skin test or other single-step tuberculosis screening test must be administered. A single annual tuberculosis screening test must be administered thereafter, unless the medical director of the facility or his designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and	T 575		

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T 575	Continued From page 9 documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200. 4. An employee with a documented history of a positive tuberculosis screening test is exempt from screening with skin tests or chest radiographs unless he develops symptoms suggestive of tuberculosis. 5. A person who demonstrates a positive tuberculosis screening test administered pursuant to subsection 3 shall submit to a chest radiograph and medical evaluation for active tuberculosis. 6. Counseling and preventive treatment must be offered to a person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200. 7. A medical facility shall maintain surveillance of employees for the development of pulmonary symptoms. A person with a history of tuberculosis or a positive tuberculosis screening test shall report promptly to the infection control specialist, if any, or to the director or other person in charge of the medical facility if the medical facility has not designated an infection control specialist, when any pulmonary symptoms develop. If symptoms of tuberculosis are present, the employee shall be evaluated for tuberculosis. This STANDARD is not met as evidenced by: Surveyor: 28725 Based on record review and interview on 1/27/10, the facility failed to screen 2 of 2 employees	T 575		

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T 575	Continued From page 10 (Employee #1 and #2) for tuberculosis. Severity: 2 Scope: 3	T 575		